## FIRE PERMIT APPLICATION



DATE

OFFICE OF INSPECTIONS SECAUCUS FIRE INSPECTOR

SIGNED

1203 PATERSN PLANK ROAD MUNICIPAL GOVERNMENT CENTER SECAUCUS, NJ 07094 TEL 201-330-2059	OFFICE USE ONLY
	FEE AMOUNT PAID \$
	DATE PAID
	CHECK# CASH
DATE	PERMIT TYPE
APPLICANT	FIRE PERMIT #
YOUR PERMIT WILL EXPIRE ON DECEMBER 31,, I PLEASE FILL OUT THIS IN FULL AND MAIL IT ALONG W PO BOX 1446, SECAUC	TITH YOUR CHECK TO: SECAUCUS FIRE INSPECTOR,
LOCATION OF ACTIVITY:	
PROPOSED DATES:	
TELEPHONE #:	FAX#
CORPORATIONPARTNERSHIP	INDIVIDUAL LIC#
The above named applicant hereby requests permission to conduct the following activity	ty at the above location
And for the keeping, storage, occupany, sale, handling, or manufacture of the following	7
STATE QUANTITIES FOR EACH CATEGORY TO BE STORED: _	
METHOD OF STORAGE:	
I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION, THE OWNER OR DULY AUTHORIZED TO ACT IN THE OWNER'S BE APPLICABLE REQUIREMENTS OF THE FIRE CODE AS WELL AS ANY	HALF AND AS SUCH HEREBY AGREE TO COMPLY WITH THE

TITLE